

**DEPARTMENT OF FINANCE AND ADMINISTRATION
OFFICE OF PERSONNEL MANAGEMENT
SPECIAL ENTRY RATE – EXCEPTIONALLY WELL QUALIFIED APPLICANT**

AGENCY/INSTITUTION

POSITION/ITEM NO.	TITLE (Attach description of job duties)	GRADE	CLASS CODE
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APPLICANT'S NAME	CURRENT SALARY	REQUESTED SALARY
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APPLICANT QUALIFICATIONS: (Summarize) (Attach Resume and Completed State Job Application Form)

MINIMUM QUALIFICATIONS: (As stated on Class Specification)

ATTACH OPM FORM 081 FOR ELIGIBLE APPLICANTS NOT SELECTED

**AGENCY/INSTITUTION
PERSONNEL REPRESENTATIVE**

AGENCY DIRECTOR/INSTITUTION HEAD

Date: _____

Date: _____

OFFICE OF PERSONNEL MANAGEMENT - ACTION

REVIEWED BY:

REVIEWED BY:

OPM PERSONNEL REPRESENTATIVE

CLASSIFICATION/COMPENSATION SECTION

Date: _____

Date: _____